



03500.012806 (35.C12806)

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
AKIRA SENDA)
Application No.: 09/103,398)
Filed: June 24, 1998)
For: LENS UNIT WITH LOCAL CONTROL)
BY THE LENS UNIT OR REMOTE)
CONTROL BY A CAMERA UNIT AND)
WITH DETECTING OF SIGNAL FROM)
CAMERA UNIT)

Examiner: J. Whipkey
Group Art Unit: 2612
June 14, 2004

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JUN 17 2004

Technology Center 2600

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Introductory Comments

Prior to further examination on the merits, please amend the above-identified application as follows:

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In re Application of:

Docket No. 03500.012806 (35.C12806)

AKIRA SENDA

Application No.: 09/103,398

Examiner: J. Whipkey

Filed: June 24, 1998

Group Art Unit: 2612

For: LENS UNIT WITH LOCAL CONTROL BY
THE LENS UNIT OR REMOTE CONTROL
BY A CAMERA UNIT AND WITH DETECTING
OF SIGNAL FROM CAMERA UNIT

June 14, 2004

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Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Preliminary Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	28	MINUS	30	0	x \$9 \$18	\$0.00
INDEP. CLAIMS	5	MINUS	5	0	x \$42 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$____ is enclosed.
- ☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$____ to cover the fee for a ____ month extension is enclosed.
- ☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant
Daniel S. Glueck
Registration No. 37,838

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

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